

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ph</i>	<i>6284</i>	<i>9/27/60</i>
O.I.P.E. CLASSIFIER		<i>69452</i>	<i>11/13/60</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
= ..... Allowed                      I ..... Interference  
- (Through numeral)..... Canceled      A ..... Appeal  
÷ ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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